

Permit No: \_\_\_\_\_

Date Approved/ Disapproved	PD	Fire	Traffic	PW

Office Use Only



**CITY OF SUGAR LAND**  
**SPECIAL EVENTS APPLICATION**

1. Applicant Name: \_\_\_\_\_  
Home Address: \_\_\_\_\_  
Telephone Number: \_\_\_\_\_  
Contact Person & Phone Number: \_\_\_\_\_  
Address Permit can be mailed to: \_\_\_\_\_
  
2. If the special event is proposed to be conducted for, on behalf of, or by an organization, list the name, address, and telephone number of the headquarters of the organization and of the authorized and responsible heads of such organization.  
  
Organization: \_\_\_\_\_  
Address: \_\_\_\_\_  
Telephone Number: \_\_\_\_\_  
Head of Organization: \_\_\_\_\_
  
3. Date of Event & Chairman: \_\_\_\_\_  
Address: \_\_\_\_\_  
Telephone Number: \_\_\_\_\_
  
4. The special event will assemble at the location of \_\_\_\_\_  
at \_\_\_\_\_: \_\_\_\_\_ (a.m./p.m.).
  
5. The special event will begin at \_\_\_\_\_: \_\_\_\_\_ (a.m./p.m.) and will terminate on or before  
\_\_\_\_\_: \_\_\_\_\_ (a.m./p.m.).

6. The special event will consist of approximately \_\_\_\_\_ persons, \_\_\_\_\_ animals, and \_\_\_\_\_ vehicles. Type of animals, if any \_\_\_\_\_ . Type of vehicles, if any \_\_\_\_\_ .
7. Will the event occupy all or a portion of the width of the streets to be traversed? *(a map or drawing should be submitted with application)* \_\_\_\_\_
8. Purpose of special event. \_\_\_\_\_
9. Additional Comments/Information: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_.

By signature below, I certify the above information to be true and correct. Any misrepresentation made in this application, intentional or otherwise, is valid grounds for permit denial both in the present and at all future times.

Signature \_\_\_\_\_

Date \_\_\_\_\_

**Application must be submitted at least 30 days prior to event.**